

C./99.5° F.), shortness of breath, sore throat, and a positive SARS-CoV-2 rtPCR test 2.) COVID-19 Hospitalization defined as confirmed hospitalization due to COVID-19, and 3.) Symptoms Severity of COVID-19 was defined as symptoms severity of COVID-19 using Brescia-COVID Respiratory Severity Scale (BCRSS).

[0335] All subjects were tested and found to be positive for SARS-CoV-2 infection. All subjects were monitored for one month after the initiation of the therapy. 0 of 8 subjects in the docetaxel arm were admitted to the hospital after their first visit. 2 of 8 subjects in the standard care group were admitted to the hospital with an average BCRSS score of 4.5.

[0336] It should be noted that the dosage used in administering embodiments of the compositions can be low and still be effective. A low dosage can be within a range from 1/10× to 1× of the following exemplary dosages listed:

[0337] topical skin application of finasteride at 10% (w/w)

[0338] oral finasteride at 0.1-10 mg

[0339] dutasteride at 0.1 mg/day to 1.0 mg/day

[0340] degarelix at 240 mg

[0341] oral cannabidiol at 10/mg/Kg/day

[0342] oral flutamide at 750 mg/day

[0343] enzalutamide at 160 mg qd

[0344] oral dutasteride at 0.25 mg/day

[0345] apalutamide at 60 mg 4 times per day

[0346] injection of cyproterone acetate (300 mg).

[0347] subcutaneous injection of degarelix (120 mg)

[0348] bicalutamide at 50 mg per day

[0349] subcutaneous injection of degarelix (120 mg)

[0350] oral darolutamide at 300 mg twice daily

[0351] abiraterone at 500 mg twice daily

[0352] oral nilutamide at 300 mg once daily

[0353] docetaxel at 75 mg/m² IV over 1 hour

[0354] However, dosages within a range from 1/10× to 3× of the above identified dosages can be used. Thus, dosages can be within a range from: topical skin application of finasteride at 1-30% (w/w)

[0355] oral finasteride at 0.01-30 mg

[0356] dutasteride at 0.1 mg/day to 3.0 mg/day

[0357] degarelix at 24 mg-720 mg

[0358] oral cannabidiol at 1-30/mg/Kg/day

[0359] oral flutamide at 75-2,250 mg/day

[0360] enzalutamide at 16-480 mg qd

[0361] oral dutasteride at 0.025-0.75 mg/day

[0362] apalutamide at 6-180 mg 4 times per day

[0363] injection of cyproterone acetate (30-900 mg).

[0364] subcutaneous injection of degarelix (12-360 mg)

[0365] bicalutamide at 5-150 mg per day

[0366] subcutaneous injection of degarelix (12-360 mg)

[0367] oral darolutamide at 30-900 mg twice daily

[0368] abiraterone at 50-1500 mg twice daily

[0369] oral nilutamide at 30-900 mg once daily

[0370] docetaxel at 7.5-225 mg/m² IV over 1 hour

1. A method for treating a patient with or a patient at risk of developing an influenza infection, wherein the method comprises administering a composition to the patient, wherein the composition comprises an anti-androgen.

2. The method of claim 1, wherein the anti-androgen is any one or combination of: cyproterone acetate, megestrol acetate, chlormadinone acetate, spironolactone, medrogestone, oxendolone, osaterone, bifluranol, finasteride, dutasteride, flutamide, bicalutamide, nilutamide, topilutamide, enzalutamide, apalutamide, dienogest, drospirenone, medro-

gestone, nomegestrol acetate, promegestone, trimegestone, ketoconazole, abiraterone acetate, seviteronel, aminoglutethimide, epristeride, alfaestradiol, isotretinoin, saw palmetto, darolutamide, galeterone, proxalutamide, triptorelin pamoate, allylestrenol, chlormadinone acetate or degarelix.

3. The method of claim 1, wherein the method further comprises administering an anti-thyroid medication, a thyroid receptor inhibitor, a TGF- β inhibitor or a combination thereof.

4. The method of claim 3, wherein the anti-thyroid medication is selected from sodium iodide, potassium iodide, colloidal iodine, tapazole, methimazole, sodium iodide-i-131, Iodotope, iosat, Northyx, Tapazole, Propylthiouracil, PropylThyracil, PTU, SSKI, ThyroSafe, ThyroShield, iOSAT, Sodium iodide 131I, Hicon or a combination thereof.

5. The method of claim 3, wherein the thyroid receptor inhibitor is selected from NH-3, tetraiodothyroacetic acid or a combination thereof.

6. The method of claim 3, wherein the TGF- β inhibitor is selected from M7824, bintrafusp alfa, galunisertib, SAR439459, NIS793, PF-06952229, vactosertib, AVID200, ARGX-115, ABBV-151, trabedersen, VTX-002, ACE-1332, SRK-181 or a combination thereof.

7. (canceled)

8. (canceled)

9. A method for treating a patient with or a patient at risk of developing an influenza infection, wherein the method comprises administering to the patient an anti-androgen, an anti-thyroid medication, a thyroid receptor inhibitor, a TGF- β inhibitor or a combination thereof.

10. The method of claim 9, wherein the anti-thyroid medication is selected from sodium iodide, potassium iodide, colloidal iodine, tapazole, methimazole, sodium iodide-i-131, Iodotope, iosat, Northyx, Tapazole, Propylthiouracil, PropylThyracil, PTU, SSKI, ThyroSafe, ThyroShield, iOSAT, Sodium iodide 131I, Hicon or a combination thereof.

11. The method of claim 9, wherein the thyroid receptor inhibitor is selected from NH-3, tetraiodothyroacetic acid or a combination thereof.

12. The method of claim 9, wherein the TGF- β inhibitor is selected from M7824, bintrafusp alfa, galunisertib, SAR439459, NIS793, PF-06952229, vactosertib, AVID200, ARGX-115, ABBV-151, trabedersen, VTX-002, ACE-1332, SRK-181 or a combination thereof.

13. The method of claim 9, wherein the anti-androgen is any one or combination of: cyproterone acetate, megestrol acetate, chlormadinone acetate, spironolactone, medrogestone, oxendolone, osaterone, bifluranol, finasteride, dutasteride, flutamide, bicalutamide, nilutamide, topilutamide, enzalutamide, apalutamide, dienogest, drospirenone, medrogestone, nomegestrol acetate, promegestone, trimegestone, ketoconazole, abiraterone acetate, seviteronel, aminoglutethimide, epristeride, alfaestradiol, isotretinoin, saw palmetto, darolutamide, galeterone, proxalutamide, triptorelin pamoate, allylestrenol, chlormadinone acetate or degarelix.

14. (canceled)

15. The method of claim 1, wherein the patient also has prostate cancer.

16. The method of claim 9, wherein the method further comprises administering agents that counter the effect of androgens.